PTO SB/05 (12/97)

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Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	**1027.P005US**
First Named Inventor or Application Identifier	**George Van Campen**
Title	**METHOD AND APPARATUS FOR PROVIDING COMPLEX TISSUE STIMULATION PATTERNS**
Express Mail Label No.	**EU 867 634 611 US**

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents

1. ☒ Fee Transmittal Form *(e.g., PTO/SB/17)* *(Submit an original, and a duplicate for fee processing)*
2. ☒ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification *[Total Pages]* **27**
   (preferred arrangement set forth below)
   - Descriptive title of the Invention
   - Cross References to Related Applications
   - Statement Regarding Fed sponsored R&D
   - Reference to sequence listing, a table, or a computer program listing appendix
   - Background of the Invention
   - Brief Summary of the Invention
   - Brief Description of the Drawings *(if filed)*
   - Detailed Description
   - Claim(s)
   - Abstract of the Disclosure
4. ☒ Drawing(s) (35 USC 113) *[Total Sheets]* **5**
5. ☒ Oath or Declaration *[Total Pages]* **3**
   (including Supplemental Declaration)
   a. ☐ Newly executed (original or copy)
   b. ☐ Copy from a prior application (37 CFR §1.63(d)) *(for continuation/divisional with Box 17 completed)*
   i. ☐ DELETION OF INVENTOR(S)
   Signed statement attached deleting inventor(s) named in the prior application, See 37 CFR §1.63(d)(2) and 1.33(b)/
6. ☐ Application Data Sheet. See 37 CFR 1.76
7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

ADDRESS TO:

Mail Stop: Patent Applications
Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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8. ☐ Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all necessary)*
   a. ☐ Computer Readable Form (CRF)
   b. Specification Sequence Listing on:
      i. ☐ CD-ROM or CD-R (2 copies); or
      ii. ☐ paper
   c. ☐ Statements verifying identity of above copies.

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & Documents(s))
10. ☐ 37 CFR §3.73(b) Statement *(when there is an assignee)*
    ☐ Power of Attorney
11. ☐ English Translation Document *(if applicable)*
12. ☐ Information Disclosure Statement (IDS)/ PTO-Form 1449
    ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) *(Should be specifically itemized)*
15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 USC 122(b)(2)(b)(i). Applicant must attach Form PTO/SB/35 or its equivalent.
17. ☐ Other: _____

18. If a CONTINUING APPLICATION, *check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76::*

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: _____

Prior application information: ***Examiner:*** _____ ***Group / Art Unit:*** _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☐ *Customer Number or Bar Code Label* *(Insert Customer No. or Attach bar code label here)* *or* ☐ *Correspondence address below*

NAME	Koestner Bertani LLP				
ADDRESS	P.O. Box 26780				
CITY	Austin	*STATE*	Texas	*ZIP CODE*	75755
COUNTRY	US	*TELEPHONE*	512-228-3611	*FAX*	512-692-2529

Name (Print/Type)	Robert A. McLauchlan	*Registration No. (Attorney/Agent)*	44,924
Signature		*Date*	July 25, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office. Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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07/25/03

FEE TRANSMITTAL FOR FY 2003

Patent Fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

Total Amount of Payment | **$ 444.00**

Application Number	Unknown
Filing Date	Herewith
First Named Inventor	George Van Campen
Examiner Name	Unknown
Group / Art Unit	Unknown
Attorney Docket No.	1027.P005US

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METHOD OF PAYMENT *(check all that apply)*

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit Account No.: 50-2240

Deposit Account Name: Koestner Bertaini, LLP

The Director is authorized to: *(check all that apply)*

☐ Charge any fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below **(except for the filing fee)** to the above identified deposit account.

FEE CALCULATION

1. Basic Filing Fee

Large Entity		Small Entity		Fee Description	Fee Paid
FeeCode	Fee($)	Fee Code	Fee ($)		
1001	750	2001	375	Utility Filing Fee	$ 375.00
1002	330	2002	165	Design Filing Fee	$
1003	520	2003	260	Plant Filing Fee	$
1004	750	2004	375	Reissue Filing Fee	$
1005	160	2005	80	Provisional Filing Fee	$
				Subtotal (1)	$ 375.00

2. Extra Claim Fees

Claims		Extra		Fee (below)		Fee Paid
Total	23 - 20 =	3	x	$ 9.00	=	$27.00
Indep.	4 - 3 =	1	x	$42.00	=	$42.00
Multiple Dependent						

Large Entity		Small Entity		Fee Description
Fee Code	Fee ($)	Fee Code	Fee ($)	
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent
				Subtotal (2) $ 69.00

**or number previously paid, if greater. For Reissues, see below

FEE CALCULATION (continued)

3. Additional Fees

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee ($)	Fee Code	Fee ($)		
1051	130	2051	65	Surcharge - late fee or oath	$
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	$
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	Request for Reexamination	$
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	$
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action	$
1251	110	2251	55	Extension for reply within first month	$
1252	400	2252	200	Extension for reply within second month	$
1253	920	2253	460	Extension for reply within third month	$
1254	1,440	2254	720	Extension for reply within fourth month	$
1255	1,960	2255	980	Extension for reply within fifth month	$
1401	320	2401	160	Notice of Appeal	$
1402	320	2402	160	Filing a brief in support of an appeal	$
1403	280	2403	140	Request for oral hearing	$
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive – unavoidable	$
1453	1,280	2453	640	Petition to revive – unintentional	$
1501	1,280	2501	640	Utility issue fee (or reissue)	$
1502	460	2502	230	Design issue fee	$
1460	130	1460	130	Petitions to the Commissioner unless otherwise specified	$
1807	50	1807	50	Statutory Disclaimer	$
1806	180	1806	180	Submission of Information Disclosure Statement	$
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	$
1809	740	2809	370	Filing a submission after final rejection (37 CFR 1.129(a))	$
1810	740	2810	370	For each additional invention to be examined (37 CFR 1.129(b))	$
1801	740	2801	370	Request for Continued Examination (RCE)	$
1802	900	1802	900	Request for expedited examination of a design application	$
Other fee (specify):					$
* Reduced by Basic Filing Fee Paid				Subtotal (3)	$

SUBMITTED BY				Complete (if applicable)
Name (Print/Type)	Robert A. McLauchlan	Registration No. 44,924	Telephone	(512) 339-4100
Signature			Date	July 25, 2003